

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | MW | | 1-27 |
| O.I.P.E. CLASSIFIER | | 3 | 12/7 |
| FORMALITY REVIEW | MM | 920 | 12-05-01 |
| RESPONSE FORMALITY REVIEW | CG | 1114 | 03-11-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
| 1 | 10/2/02 |
| 2 | 10/2/02 |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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10/2/02
 12/5/01
 10/2/02